# UNITED STATES DISTRICT COURT SDNY PRO SE OFFICE SOUTHERN DISTRICT OF NEW YORK 28 AN 10: 32

Joshya Liner	_
	No
Write the full name of each plaintiff.	(To be filled out by Clerk's Office)
-against-	COMPLAINT
Kathy Huchyl, Gov.	(Prisoner)
State of New York	(111001101)
	Do you want a jury trial?
Ramon Alvarez,	□Yes □ No
and the second of the second o	≥ Joho Doe 2#
John Doe 1# officer your A	Lecint yoth precint
Write the full name of each defendant. If you cannot fit the	, ,
names of all of the defendants in the space provided, please	
write "see attached" in the space above and attach an	
additional sheet of paper with the full list of names. The	
names listed above must be identical to those contained in	
Section IV.	

### **NOTICE**

The public can access electronic court files. For privacy and security reasons, papers filed with the court should therefore *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number. See Federal Rule of Civil Procedure 5.2.

T	LEGA	I RA	SIS	FOR	CI	AIM
I .	LEGA	LDA	O.L.O.	TON		

prisoners challeng often brought und	ederal legal basis for your ging the constitutionality o der 42 U.S.C. § 1983 (again gainst federal defendants	of their conditions nst state, county, c	of confinement; those	e claims are
Violation of 1	ny federal constitutional	rights		
☐ Other:				AVANTA
II. PLAINT	IFF INFORMATION			
Each plaintiff mus	at provide the following in	formation. Attach	additional pages if neo	cessary.
Joshua	<u>C</u> .	<u> </u>	I NEV	
First Name	Middle Initial	Last Na	me	
	ames (or different forms of previously filing a lawsuit		have ever used, includ	ing any name
Prisoner ID # (if you have previously been in another agency's custody, please specify each agency and the ID number (such as your DIN or NYSID) under which you were held)  N/A				
Current Place of	Detention	. [		
		AIN		.,,
Institutional Add	ress	5×7 ( ax	Bland & Ave	APE 4A
NA	Street Address	BRONK	Bland & Ave New York	10451
County, City		State	Zip Cod	е
III. PRISON	IER STATUS			
Indicate below w	hether you are a prisoner	or other confined	person:	
☐ Pretrial deta	inee			
☐ Civilly committed detainee				
☐ Immigration detainee				
☐ Convicted ar	nd sentenced prisoner			
☐ Other:	Cit.	Zen		

## IV. DEFENDANT INFORMATION

To the best of your ability, provide the following information for each defendant. If the correct information is not provided, it could delay or prevent service of the complaint on the defendant. Make sure that the defendants listed below are identical to those listed in the caption. Attach additional pages as necessary.

Defendant 1:	Kathy	Hochyl			
	First Name	Last Name	Shield #		
		GOVERNOR			
	Current Job Title (	or other identifying information)			
		Albany NY			
	Current Work Add	dress			
		Albany NY			
	County, City	<b>/</b> State	Zip Code		
Defendant 2:	Bamoi	N Alvarez			
	First Name	Last Name	Shield #		
	Current Job Title (	(or other identifying information)	. Apt YA		
		Courtland t Ave	. Apc III		
	Current Work Add				
	BRON	a. I louis			
	County, City	State	Zip Code		
Defendant 3:	<b>1</b>	Day 1H			
Derendant 3:	First Name	Last Name	Shield #		
	FIISCIVAINE	~ CO ~	Sincia II		
	Current Job Title (or other identifying information)				
		^ .			
		oth Precint			
	Current Work Add	aress			
	C	Chata	Zip Code		
	County, City	State	zip code		
Defendant 4:					
	First Name	Last Name	Shield #		
	C LIL TIN	(they identifying information)			
	Current Job Title (or other identifying information)				
Current Work Address					
	County, City	State	Zip Code		

V. STATEMENT OF CLA	AIM			
Place(s) of occurrence:	«58Z	Court	Landt	Ave
Date(s) of occurrence:				
FACTS:				
State here briefly the FACTS that harmed, and how each defendant additional pages as necessary.	support your case. D t was personally invo	escribe what ha blved in the alleg	ppened, how yo ged wrongful acti	u were ons. Attach
The ste	fendant	Kathy	Hochyl	1
has placed t	Executive	order	exclud	ing
has placed to resident occ	4 pant on	) Hremi	ses to	_be_
evicted, w	1ithin the	at Cap	acity,	the
Squatter	Rymon	Alvarez	. Has	remain
on the H	louse Hold	for	Nearly	(db)
Month	Without	Haying	rent.	00
each Occ	asion Jo	HN Doe	1+,	officer
JOHN DOE	24 off	icer h	45 tak	en
the HAIN	tiff from	1 Mis	Home i	7601)
- Juesation	3 of t	he Squ	17-bter	RAMON
Alvarez,	ON HO	rassmen	of and	greste
Him - F	Historial (	Challeng-	es unla	wfy!
avrest	npon	40 en	recin t	4150
John H	se 1 th	707	2+	45
the Y	Jefen Jants	has =	4WYKen	Him
From 1	ris Sleep	1 60	per form	· Such
Acts	- (Se	Att	sched S	street)

INJURIES:
If you were injured as a result of these actions, describe your injuries and what medical treatment, if any, you required and received.
The plaintiff experience emotional Stress Hearts problems was taken  Thy ambulance to Hospital on two Separate Occasions.
Stress Heart Mroblems Was taken
the ambulance to Hospital on two
Se parate Occasions.
VI. RELIEF
State briefly what money damages or other relief you want the court to order.
The plaintiff Seek Emotional Stress payment from State of NewYork 250,000 two hundred fifty Thousand dollars.
two hundred fifty Thusand dollars.
The HAIN LIFF Seeks FUNTIVE DIMAGES IN
The plaintiff seeks puntive Mamages in the Sum of 250,000 (Two Hundred
of Ramon Alvarez, From the House
of Ramon Alvarez, From the House
Hold, premises.
(See Attached Sheet)

#### VII. PLAINTIFF'S CERTIFICATION AND WARNINGS

By signing below, I certify to the best of my knowledge, information, and belief that: (1) the complaint is not being presented for an improper purpose (such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation); (2) the claims are supported by existing law or by a nonfrivolous argument to change existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Federal Rule of Civil Procedure 11.

I understand that if I file three or more cases while I am a prisoner that are dismissed as frivolous, malicious, or for failure to state a claim, I may be denied *in forma pauperis* status in future cases.

I also understand that prisoners must exhaust administrative procedures before filing an action in federal court about prison conditions, 42 U.S.C. § 1997e(a), and that my case may be dismissed if I have not exhausted administrative remedies as required.

I agree to provide the Clerk's Office with any changes to my address. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Each Plaintiff must sign and date the complaint. Attach additional pages if necessary. If seeking to

Dated

Dated

Plaintiff's Signature

Prison Address

Prison Address

Prison Address

Plaintiff must also submit an IFP application.

Plaintiff s Signature

Line

Last Name

Dated

Prison Address

New York

State

Zip Code

Date on which I am delivering this complaint to prison authorities for mailing:

C	ount
The Complaint Count 1# Charges And	24
Michael Havid with unlawful	
Arrest MAON Allegations Made	*
Fig Ramon Alvarez, 11/23,21	
other dates to be implement buter.	<u> </u>
Count 2# the Complaint Charges	
racial Miscrimination, toward	
JOHN MOR 1# Sergeant ON 11/23 2	31
AND COUNT 3# Charges UN Lawful	
Arrest. The Complaint States	
to other Mates upon Miscovery	
to he implement for the recor.	1
15 COUNT 4th Charges UN HWFUL	
grest	
The Complaint Charges Hefendant	5
under this Section of the	
I you with CONSpiracy to	
Violate State and Federal	
14WS.	
	75
	-
(1)	

Michael Mavid
The Complaint Seeks Compensation
IN the Sum of (250,000):
Two Hundred and fifty Thousand
For UNHWful Arrest-
The Complaint Seeks
(250,000) - Two Hundred and
fifty Thousand in punitive damages.
The COMPHINT Seeks (250, 000);
Two Hundred and fifty Thousand in
Emotional distress payment.
(2)

	The Complaint Charges Count 14
	Ramon Alvarez, with Damasing
	legal Court Hocuments ON May 28,
	2021, IN the Country of BRONX
<del></del>	New York, perp Snitch legal
	eviction papers FAN threw them
	IN Feces wasted water on
	the Street - ON about on August 20.21.
	Count 2+ Charges, Hestroying Court papers
	Mefendant Ramon Alvarez Has Not
	paid rent in the months, Squatter
	Subject Has located His Girl IN
	the premises, Smoke weed all day
	ON premises - Subject uses his
	Money on weed He and his
	girl Friends Steals From the
	House - Fited Numerous False
,	
	Chaims in Court. The Subject
	Leaves the lights on all
	Night, then goes outside
	leaving the lights on.
	Count 3, Charges Conspiracy
	to Violate State and Federal:
	(1)

	The Mefenstant Ramon Alvarez,
	Fights With his girl Friend
	and has broken the Front
*;	Moor lock. And Continuous
	Fighting has placed large
<del></del>	Hole in his room Door.
	HAS Groken two Mico waves,
	ON Several Occasions prolice
	He Called they began Speaking
<u> </u>	Spanish Do Charges are Filed.
***************************************	His girl Friend Hasstelen
	Stesks, Clothin's won, the has
· · · · · · · · · · · · · · · · · · ·	Stolen Clothing. Reports yre
	lodge No police investigations,
	NO Follow up. My stater Jewelry.
	Stolen who is decease. And
	Police and Sergeant Says they
	CANNOT He evicted. Now
***************************************	Governor these are Federal
	Fight Violations- The
	rent is Now \$2400-00
work	Who Hays it me.
	(2)

	The squatter Needs to Vacate
	the premises.
3	Damages = Ramon Alvarez
	Compensation in Hamages:
	The Complaint Seeks 7, 500
	IN payment of back rent -
	ONE HUNdred Thousand in punitive
	Manage Upon False Chims.
	The Complaint Seeks one hundred
	Thousand upon emotional stress
	May ment - (100,000) -
	75
	(3)

# FROM:

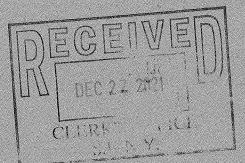
JOSHUA LMER 582 COURTHAND FAR APAT AA Bronx, MY 10451





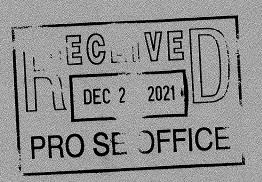
U.S. POSTAGE PAID FCM LG ENV NEW YORK, NY 10025 1025 121 AMOUNT 13690

RECEIVED



TO:

United States District Court
Southern District of N.Y.
500 PEAR Street
N.Y. NY. 10007-1312



ANGS

Pro Se Il



Utility Mailer 10 1/2" x 16"

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